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Date: OCTOBER 18, 2004

To: EXAMINER KIMBERLY D. NGUYEN  
U.S. PATENT AND TRADEMARK OFFICE  
Fax #: (703) 872-9319From: FRANK C. NICHOLAS  
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Client/Matter No.: FR 000130 (7790/194)

# of Pages: 20

(including cover sheet)

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**TRANSMITTAL  
FORM**

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Attorney Docket No	FR 000130 (7790/194)
Application Number	10/015,965
Filing Date	NOVEMBER 30, 2001
First Named Inventor	YANNICK VINCENT
Group Art Unit	2878
Examiner	NGUYEN, KIMBERLY D

**ENCLOSURES (check all that apply)**

ENCLOSURE SHEET (check all that apply)		
<input type="checkbox"/> Amendment	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Alter Final	<input type="checkbox"/> Drawings	<input checked="" type="checkbox"/> Reply Brief
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Alter Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Petition for Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) <i>(please identify below)</i>
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request of Refund	
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	

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Index		Minus		0	x \$4=	0	
<b>First Presentation of Multiple Dep. Claims</b>				x \$44	0		
				+ \$150	--		
				total add'l fee	\$ 0	fee /dep. rate	\$

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

**FIRM  
or  
Individual Name** FRANK C NICHOLAS  
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I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9319 to the U.S. Patent and Trademark Office on this date.

October 18, 2004

Signature		Date <u>October 18, 2004</u>
FRANK C. NICHOLAS (33,983)		